

**Marion Board of Health
2 Spring Street
Marion, MA 02738
508 748 3530**

**2008 Marion Board of Health
Title V Inspector Registration**

Effective January 1, 2004, all Title V inspectors doing business in the Town of Marion must be registered with the Board of Health.

In addition, please be aware that Title V inspection reports will not be accepted without a \$50.00 payment accompanied with the report.

Business Name_____

Business Mailing Address_____

Business Telephone Number(s)_____

Cellular Telephone Number(s)_____

Business Pager Number(s)_____

Name and Title of Applicant_____

Payment is due with Registration Total \$10.00

State Licensing Number_____

Signature of Applicant_____

Date Signed_____

1. Make checks payable to "Town of Marion".
2. Address envelope to "Marion Board of Health, 2 Spring Street, Marion, MA 02738".

The responsibility to be registered with the Town is that of the applicant/inspector.